

Application for *Professional Land Surveyor-in-Training*

d. Date of Birth	Place of Birth

- e. Can you speak and understand the English language? _____
- f. Have you ever filed an application with this Board? _____ If yes, type of application _____
When? _____
- g. Has your name changed since birth? _____ Was your previous application made with the
same name? _____
- h. Have you ever been disciplined by any state licensing authority? _____
If so, please explain _____
- i. Have you ever been convicted of a felony? _____ If yes, please attach a separate
statement describing the circumstances.

EDUCATION RECORD –List high school and all colleges and universities in the order you attended. A copy or high school diploma or GED certificate must be submitted with your application unless you are a college graduate. College graduates must submit CERTIFIED transcripts and a completed course reporting form with your application. You must highlight or list on the course reporting form all surveying related courses you are claiming for credit under the provisions of TCA 62-18-109b(1)(F) (i), (ii), (iii), and (iv).

NAME AND ADDRESS OF INSTITUTION	YEARS ATTENDED		MAJOR	DATE OF GRADUATION	DEGREE RECEIVED
	From	To			

EXPERIENCE BACKGROUND

IF YOU ARE APPLYING UNDER SECTION iv (ASSOCIATES DEGREE) or SECTION v (HIGH SCHOOL DIPLOMA OR GED), YOU WILL NEED TO COMPLETE THE EXPERIENCE BACKGROUND BELOW.

List each period of employment in chronological order and use a position block for each employer or for each time that you had a significant change in duties and responsibilities. The last block is the summary of your complete surveying experience history. **ONE LINE IS NOT SUFFICIENT.** Experience acceptable for licensure as a land surveyor must be progressive and diverse and include, as a minimum, the following aspects of land surveying: **Field experience** should include field measurements with a variety of instruments, discovering and interpreting boundary evidence, staking line and grade and field procedures for topographic mapping. **Office experience** should include traverse closure and adjustment, survey accuracy and quality control of field data, state plane coordinate computation and translations, boundary evidence analysis and resolution with record title, drafting plats and writing descriptions of surveys and knowledge and understanding of the subdivision process. **Research experience** should include familiarity with the county record filing process, including deed research in county registers' offices and tax assessors' offices, along with plans and records held by state and county highway departments and utility departments. The applicant, during his work history, is expected to have acquired experience in the overall management of surveying projects, to include, a high degree of integrity in the practice of surveying, understanding and following a code of ethics, interpersonal communication skills, project planning and scheduling, and safeguarding the health, safety and welfare of the public in daily work activities. **EXPERIENCE CANNOT BE ANTICIPATED. YOU MUST HAVE THE REQUIRED EXPERIENCE WHEN YOUR APPLICATION IS SUBMITTED.**

POSITION NUMBER _____	TITLE OF POSITION _____
EMPLOYED FROM: _____ TO _____	AVERAGE # OF HRS. WORKED PER WEEK _____
MO/YR	MO/YR
EMPLOYER NAME _____	TYPE OF BUSINESS _____
EMPLOYER ADDRESS _____	
STREET	CITY/STATE
ZIP	
NAME OF YOUR IMMEDIATE SUPERVISOR _____	LICENSE # _____
EMPLOYER TELEPHONE NUMBER (_____) _____	

<p align="center">DESCRIBE YOUR MAJOR DUTIES/RESPONSIBILITIES BELOW</p>	
<p> </p>	

[illegible]

TOTAL NUMBER OF MONTHS

	TYPE EXPERIENCE: Office _____% Field _____% Research _____%
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POSITION NUMBER _____	TITLE OF POSITION _____
EMPLOYED FROM: _____ TO _____	AVERAGE # OF HRS. WORKED PER WEEK _____
MO/YR MO/YR	
EMPLOYER NAME _____	TYPE OF BUSINESS _____
EMPLOYER ADDRESS _____	
STREET	CITY/STATE ZIP
NAME OF YOUR IMMEDIATE SUPERVISOR _____	LICENSE # _____
EMPLOYER TELEPHONE NUMBER (_____)	

DESCRIBE YOUR MAJOR DUTIES/RESPONSIBILITIES BELOW

TOTAL NUMBER OF MONTHS		TYPE EXPERIENCE: Office _____ % Field _____ % Research _____ %
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POSITION NUMBER _____	TITLE OF POSITION _____
EMPLOYED FROM: _____ TO _____	AVERAGE # OF HRS. WORKED PER WEEK _____
MO/YR MO/YR	
EMPLOYER NAME _____	TYPE OF BUSINESS _____
EMPLOYER ADDRESS _____	
STREET	CITY/STATE ZIP
NAME OF YOUR IMMEDIATE SUPERVISOR _____	LICENSE # _____
EMPLOYER TELEPHONE NUMBER (_____)	

DESCRIBE YOUR MAJOR DUTIES/RESPONSIBILITIES BELOW

TOTAL NUMBER OF MONTHS		TYPE EXPERIENCE: Office _____ % Field _____ % Research _____ %
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This sheet may be deleted or repeated as necessary to account for all positions held in chronological order.

3. References – You must submit three (3) character references to the board, one (1) of whom is a professional land surveyor.

NAME	STATE OF PLS LICENSURE AND LICENSE NUMBER

I hereby make application for designation as a Professional Land Surveyor-in-Training (PLSIT) to be acknowledged by the Tennessee State Board of Examiners for Land Surveyors and that I am now committed to and endeavor to complete the additional requirements to become a registered and licensed professional land surveyor in the State of Tennessee. I fully understand that the designation as PLSIT does not entitle me to practice land surveying to any extent without being under the direct supervision and responsible charge of a Tennessee licensed land surveyor.

Signature of Applicant

Subscribed and sworn to before me, on the _____ day of _____, 20 _____

Notary Public

(Seal)

My commission expires _____, 20 _____.